DISTRIBUTION CODE/ADDRESS OPTION SELECTION FOR JANUARY 1, 2004 WRS STATEMENTS OF BENEFITS

Complete this form to select a sort option for your January 1, 2004 Statements of Benefits. CHECK ONLY ONE OPTION and be sure to indicate if you will report on FTP, diskette or paper. Employer Name: _____Employer Number: 69-036-____ Name of Person completing this Form: Telephone Number (in case of questions): OPTION A **Distribution Code Order** Statements will be sorted in distribution code order and then alphabetically within distribution code. Will Report On: FTP Disk Paper **OPTION B Employee Home Address** Statements will be sorted by employee home address in zip code order. Will Report On: FTP Disk Paper **OPTION C Distribution Code Order with Home Address Printed** Statements will be sorted in distribution code order and then, alphabetically within distribution code with employees' addresses printed on the Statements. Disk Will Report On: FTP Paper OPTION D **Alphabetical Order** Statements will be sorted by employee last name in alphabetical order. Will Report On: FTP Disk Paper

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Return this selection form by March 5, 2004 to:

Dale E. Ferron
Department of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931